

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2073 OF 2402

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Fair Fight

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rubenstein, Daniel, , ,

Mailing Address 540 Eastgate Rd

City

Ho Ho Kus

State

NJ

Zip Code

07423-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2020

Transaction ID : VR060VXK1R9

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rubin, Shelley, , ,

Mailing Address 150 W 17Th St

City

New York

State

NY

Zip Code

10011-5491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Rubin Museum Of Art

Occupation (for Individual)

Co-Founder, Co-Chair

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2020

Transaction ID : VR060WCQC42

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rubinstein, Joel, , ,

Mailing Address 2023 28Th Ave

City

San Francisco

State

CA

Zip Code

94116-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2020

Transaction ID : VR060VKM838

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

5750.00

TOTAL This Period (last page this line number only).....▶